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 National Transportation Safety Board FACTUAL REPORT AVIATION		NTSB ID: LAX94LA336				
		Occurrence Date: 07/19/1962				
		Occurrence Type: Accident				
Landing Facility/Approach Information						
Airport Name		Airport ID:	Airport Elevation Ft. MSL	Runway Used	Runway Length	Runway Width
Runway Surface Type:						
Runway Surface Condition:						
Type Instrument Approach:						
VFR Approach/Landing:						
Aircraft Information						
Aircraft Manufacturer		Model/Series		Serial Number		
Airworthiness Certificate(s):						
Landing Gear Type:						
Homebuilt Aircraft?	Number of Seats:	Certified Max Gross Wt. LBS		Number of Engines: 1		
Engine Type:	Engine Manufacturer:	Model/Series:		Rated Power:		
- Aircraft Inspection Information						
Type of Last Inspection	Date of Last Inspection	Time Since Last Inspection Hours		Airframe Total Time Hours		
- Emergency Locator Transmitter (ELT) Information						
ELT Installed?	ELT Operated?	ELT Aided in Locating Accident Site?				
Owner/Operator Information						
Registered Aircraft Owner		Street Address				
		City	State	Zip Code		
Operator of Aircraft		Street Address				
		City	State	Zip Code		
Operator Does Business As:			Operator Designator Code:			
- Type of U.S. Certificate(s) Held: None						
Air Carrier Operating Certificate(s):						
Operating Certificate:			Operator Certificate:			
Regulation Flight Conducted Under:						
Type of Flight Operation Conducted:						
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First Pilot Information																																																																																				
Name			City		State																																																																															
					Age 26																																																																															
Sex:	Seat Occupied:	Principal Profession:		Certificate Number:																																																																																
Certificate(s):																																																																																				
Airplane Rating(s):																																																																																				
Rotorcraft/Glider/LTA:																																																																																				
Instrument Rating(s): None																																																																																				
Instructor Rating(s):																																																																																				
Type Rating/Endorsement for Accident/Incident Aircraft?				Current Biennial Flight Review?																																																																																
Medical Cert.:		Medical Cert. Status:		Date of Last Medical Exam:																																																																																
<table border="1"> <tr> <th rowspan="2">- Flight Time Matrix</th> <th rowspan="2">All A/C</th> <th rowspan="2">This Make and Model</th> <th rowspan="2">Airplane Single Engine</th> <th rowspan="2">Airplane Multi-Engine</th> <th rowspan="2">Night</th> <th colspan="2">Instrument</th> <th rowspan="2">Rotorcraft</th> <th rowspan="2">Glider</th> <th rowspan="2">Lighter Than Air</th> </tr> <tr> <th>Actual</th> <th>Simulated</th> </tr> <tr> <td>Total Time</td> <td>Unk/Nr</td> <td>Unk/Nr</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Pilot In Command(PIC)</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Instructor</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 90 Days</td> <td>Unk/Nr</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 30 Days</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>Last 24 Hours</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>						- Flight Time Matrix	All A/C	This Make and Model	Airplane Single Engine	Airplane Multi-Engine	Night	Instrument		Rotorcraft	Glider	Lighter Than Air	Actual	Simulated	Total Time	Unk/Nr	Unk/Nr									Pilot In Command(PIC)											Instructor											Last 90 Days	Unk/Nr										Last 30 Days											Last 24 Hours										
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Seatbelt Used?		Shoulder Harness Used?		Toxicology Performed?																																																																																
				Second Pilot?																																																																																
Flight Plan/Itinerary																																																																																				
Type of Flight Plan Filed:																																																																																				
Departure Point			State	Airport Identifier	Departure Time																																																																															
					Time Zone																																																																															
Destination			State	Airport Identifier																																																																																
Type of Clearance:																																																																																				
Type of Airspace:																																																																																				
Weather Information																																																																																				
Source of Briefing:																																																																																				
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		Occurrence Type: Accident			

Weather Information					
WOF ID	Observation Time	Time Zone	WOF Elevation <div style="text-align: center;">Ft. MSL</div>	WOF Distance From Accident Site <div style="text-align: center;">NM</div>	Direction From Accident Site <div style="text-align: center;">Deg. Mag.</div>
Sky/Lowest Cloud Condition:				Ft. AGL	Condition of Light: Night/Dark
Lowest Ceiling:			Ft. AGL	Visibility: .00 SM SM	Altimeter: "Hg
Temperature: Unk/Nr °C	Dew Point: °C	Wind Direction:		Density Altitude: Ft.	
Wind Speed:	Gusts:	Weather Conditions at Accident Site:			
Visibility (RVR): Ft.	Visibility (RVV) SM	Intensity of Precipitation:			
Restrictions to Visibility:					
Type of Precipitation:					

Accident Information					
Aircraft Damage: Destroyed		Aircraft Fire:		Aircraft Explosion	
Classification:					
- Injury Summary Matrix	Fatal	Serious	Minor	None	TOTAL
First Pilot					
Second Pilot					
Student Pilot					
Flight Instructor					
Check Pilot					
Flight Engineer					
Cabin Attendants					
Other Crew					
Passengers					
- TOTAL ABOARD -					
Other Ground					
- GRAND TOTAL -					

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Administrative Information		
Investigator-In-Charge (IIC)		
Additional Persons Participating in This Accident/Incident Investigation:		
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